

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.:	CML00830T	
First Inventor:	ROBERT T. CROSWELL	
Title:	PRINTED CIRCUIT EMBEDDED CAPACITORS	
Express Mail Label No :	ER380436930US	

TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))			CAPACITORS	
(Omy for new nonprovisional applications under 57 CFR 1.33(b))	Express	Express Mail Label No.: ER380436930US		
APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)		Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450		
1. X Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. Applicant claims small entity status See 37 CFR 1.27 3. X Specification [Total Pages	r program	table or 8. Nucleot (if a. Comp b. Specif i c. Staten ACCOMPA	M or CD-R in duplicate, large Computer Program (Appendix) ide and/or Amino Acid Sequence f applicable, all necessary) uter Readable Form (CFR) cation Sequence Listing on: CD-ROM or CD-4 (2 copies); Paper nents verifying identity of above copies NYING APPLICATION PARTS	
-Abstract of the Disclosure		9. X Assignn	nent Papers (cover sheet & document(s))	
 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets 5. Oath or Declaration [Total Sheets a. X] Newly executed (original or copy) b. Copy from prior application (37 CFR 1.63 (for continuation/divisional with Box 18 comptions) i. DELETION OF INVENTOR(S) Signed statement attached deleting invename in the prior application, see 37 C 1.63(d)(2) and 1.33(b) 6. Application Data Sheet. See 37 CFR 1.76 	B(d)) pleted) entor(s) FR	10.	B.73(b) Statement Power of Attorney where is an assignee) In Translation Document (if applicable) Intion Disclosure Copies of IDS where the copies of IDS ent (IDS)/PT-1449 Citations Interpretations Interpretation Copies	
18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in- Part (CIP) of prior application No. Prior application information: Examiner: Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
19. CORRESPONDENCE ADDRESS				
Customer Number 22917 or Correspondence address below Name James A. Lamb Address				
City Country . Telephone	State		Zip Code Fax	
Name JAMES A. LAMP Registration No. 38,529				
SIGNATURE Date 12/15/2003				

Complete if Known FEE **Application Number** TRANSMITTAL 12/15/2003 Filing Date Patent fees are subject to annual revision First Named Inventor ROBERT T. CROSWELL Applicant claims small entity status. See 37 CFR 1.27 **Examiner Name Group Art Unit** (\$) 1004.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No. **CML00830T** METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) 3. ADDITIONAL FEES Check Credit card Money Order Other None Large \square Deposit Account: Entity **Entity** Deposit Account Number Fee Fee Fee Fee 502117 Deposit Account Name (\$) Code Code (\$) Fee Description Motorola, Inc. The Director is authorized to: (check all that apply) 1051 130 2051 65 Surcharge - late filing fee or oath Surcharge - late Provisional filing X Credit any overpayments 1052 50 2052 25 l X Charge fee(s) indicated below 1053 130 1053 130 Non-English specification Charge any additional fee(s) during the pendency of this application For filing a request for ex parte 1812 2520 1812 2520 Reexamination Charge fees(s) indicated below, except for the filing fee to the 1804 920* 1804 920* Requesting publication of SIR prior to above-identified deposit account. Examiner action 1805 1840* 1805 1840* Requesting publication of SIR after Examiner action FEE CALCULATION 1251 110 2251 55 Extension for reply within first month 2252 1252 420 210 Extension for reply within second month 2253 475 1253 950 Extension for reply within third month 1254 1480 2254 740 1. BASIC FILING FEE Extension for reply within fourth month 1255 2010 2255 1005 Extension for reply within fifth month Entity 1401 2401 Large Entity Small 330 165 Notice of Appeal 1402 330 2402 Filing a brief in support of an appeal Fee Fee Fee Fee 165 (\$) (\$) Fee Paid 1403 290 2403 145 Request for oral hearing Code Code Petition to institute a public use 1451 1510 1451 1510 proceeding 1001 770 2001 385 Utility filing fee Petition to revive - unavoidable 770 1452 110 2452 55 1002 340 170 1330 2453 2002 Design filing fee 1453 665 Petition to revive - unintentional 1003 530 2003 265 Plant filing fee 1501 1330 2501 665 Utility issue fee (or reissue) 1004 780 2004 385 Reissue filing fee 1502 480 2502 240 Design issue fee 80 1005 160 2005 Provisional filing fee 1503 640 2503 320 Plant issue fee 1460 130 1460 130 Petitions to the Commissioner SUBTOTAL (1) (\$) 770 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) 2. EXTRA CLAIM FEES 1806 180 1806 180 Submission of IDS Previously Extra Fee from 8021 40 8021 40 Recording each patent assignment 40 per property (times number of properties) Claims below Fee Paid Total Claims 385 1809 2809 20 6 18 108 770 Filing a submission after final Independent Claims rejection (37 CFR § 1.129(a)) 86 86 1810 2810 385 For each additional invention to be 770 Multiple Dependent 290 examined (37 CFR § 1.129(b)) Entity 1801 770 2801 385 Request for Continued Examination Large Entity Small Fee Fee (RCE) 1802 900 1802 900 Request for expedited examination Code (\$) Code (\$) Fee Description 1202 2202 Claims in excess of 20 of a design application 1201 84 2201 42 Independent claims in excess of 3 Other fee (specify) 1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 * Reissue independent claims over original patent 1205 18 2205 9 *Reissue claims in excess of 20 and over original SUBTOTAL (2) (\$) 194.00 SUBTOTAL (3) (\$) 40.00 **or number previously paid, if greater; For Reissues, see above. * Reduced by Basic Filing Fee Paid SUBMITTED BY Complete (if applicable) (847) 576-5054 Registration No. Name (Print/Type) ÚAMES A. LAMB 38,529 Telephone Signature Date 12/15/2003